

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000055405

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** TAMPA HEARING SERVICES, INC.

**Current Principal Place of Business:**

3450 E FLETCHER AVE  
SUITE 350  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

3450 E FLETCHER AVE  
SUITE 350  
TAMPA, FL 33613

**New Mailing Address:**

**FEI Number:** 38-3802025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KRAUSE, ELIZABETH  
3450 E FLETCHER AVE  
SUITE 350  
TAMPA, FL 33613 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: AGNELLO, PETER  
Address: 3450 E FLETCHER AVE, SUITE 350  
City-St-Zip: TAMPA, FL 33613

Title: D  
Name: PATEL, NALIN  
Address: 3450 E FLETCHER AVE, SUITE 350  
City-St-Zip: TAMPA, FL 33613

Title: D  
Name: SEPER, JANET  
Address: 3450 E FLETCHER AVE, SUITE 350  
City-St-Zip: TAMPA, FL 33613

Title: D  
Name: NOFSINGER, YOON  
Address: 3450 E FLETCHER AVE, SUITE 350  
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JANET SEPER

DIR

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date